

The Town of West Hartford
Announces an Open Competitive Examination
for the Position of

Police Officer

Application Deadline:
Open until positions filled

Salary Range:
\$60,060- \$77,584

REQUIRED APPLICATION MATERIALS

1. **Town of West Hartford Application**
2. **Copy of CHIP Physical Ability Certification Card** (applicants with expired CHIP cards must be reassessed by CHIP, Inc.)
3. **Copy of College/University Transcript, or DD214 Military Service Form, or Current Police Officer Certification Card.**
4. **Drug Testing Supplement Form**
5. **Non-Smoking Statement**
6. **Body Art Acknowledgement**

A COMPLETE APPLICATION PACKAGE MUST BE ON FILE IN THE EMPLOYEE SERVICES DEPARTMENT IN ORDER TO BE CONSIDERED FOR THIS POSITION.

Minimum Qualifications

- **Age:** Twenty-one (21) years of age. *Please state your date of birth in the space provided on the application.*
- **Education:** Associates Degree or equivalency (60 credit hours) at an accredited college/university; or four years active military experience; or **Connecticut** certified police officer at the time of application. *Candidates must provide a college/university transcript documenting the completion of an Associates Degree or credit hour equivalency, or a copy of the DD214 form documenting four years of active military experience, or a copy of their current police certification with their application materials.*
- **License:** Applicants must possess and maintain a valid driver's license and a driving history in accordance with the Town of West Hartford's Safe Driving Record policy. **An individual may not be considered for appointment if he or she has had a major violation conviction within a three year period; four or more motor vehicle violations other than major within a three year period; or suspension or revocation of a license for any reason in the past five years.** A valid Connecticut Driver's License is required at the time of appointment.
- **Residency Requirement:** Candidates must be U.S. citizens and shall be required to reside within thirty (30) minutes travel time of headquarters prior to completion of the probationary period.
- **Physical Examination:** Must meet departmental physical fitness standards, certified through CHIP, Inc. prior to application. *A copy of valid CHIP certification card must accompany application materials.* A post-offer, pre-employment physical examination is required prior to appointment in accordance with departmental standards.

- **Drug Testing:** Candidates shall be required to submit to a drug test as part of the pre-employment medical examination. Applicants must complete the ***Drug Testing Supplement to the Employment Application***. Failure to do so will automatically disqualify your application for the position.
- **Non-Smoking Requirement:** Due to the physical demands of this position, the Town of West Hartford requires that all qualified candidates certify that they are non-smokers. Applicants must complete the ***Non-Smoking Statement*** as part of the application process and candidates must have refrained from smoking for at least the past six (6) months.
- **Body Art:** As a condition of obtaining and continued employment with the Town of West Hartford Police Department, all Police Officers hired on or after December 1, 2012 shall adhere to standards regarding Body Art. Applicants must complete the ***Body Art Acknowledgement***. Failure to do so will automatically disqualify your application for the position.
- **Character Requirement:** Candidates must meet the highest legal and ethical standards. ***No applicant will be accepted with any drug related conviction, felony conviction, conviction for any Class A or Class B misdemeanor or any conviction for domestic violence.*** Candidates will undergo a rigorous background investigation, including a polygraph, before any offer of employment. An applicant may be disqualified for poor employment history, recent use of illegal drugs, or previously undetected criminal activity. ***Any omission, falsification, fabrication, lie or misleading statement will automatically result in disqualification from further consideration with Town of West Hartford.***

NOTE: According to Connecticut General Statutes Sections 46b-146, 54-760 or 54-142a effective October 1, 2002, applicants are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to a finding of delinquency or a finding that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nolle, a criminal charge for which the person has been found not guilty, or a conviction for which the person received an absolute pardon.

Job Purpose

This is general duty police work involving responsibility for the protection of life and property; the prevention, detection and investigation of crime; and for maintaining law and order. Assignments are received from superior officers and are carried out in accordance with established police rules and procedures. Police Officers must use their own judgment and act without supervision in meeting emergencies. Work is reviewed through reports, on-the-job inspection and observations of results obtained.

Job Environment

Employees in this class are required to perform their duties under all conditions of weather. Hazards to personal safety arise from both personal, mechanical, natural sources and include possible loss of life.

Essential Job Functions

- Patrols an assigned area on foot or in a cruise car. Continuously checks windows and doors of business establishments and of assigned private homes; investigates any suspicious conditions.
- Maintains continuous enforcement of motor vehicle laws, criminal statutes, and local ordinances.
- Assists stranded motorists, injured persons, and ill persons. Escorts and guards payroll deliveries.
- Gives information concerning street and building locations, routes, bus schedules, etc.
- Investigates reports of wanted or missing persons or property.
- Brings persons to police station for booking of violations. May fingerprint and process suspects.
- Prepares written reports for the Prosecuting Attorney, presenting all of the facts pertaining to a particular crime.

- Testifies in court and presents evidence.
- Directs traffic at an assigned area or as indicated.
- Prepares reports of all activities and complaints.
- Reports unsafe and hazardous conditions while on patrol. May be assigned to perform predominantly traffic accident investigations and the conduct of safety programs while detailed to the Traffic Division.
- May be assigned to perform predominantly complaint desk, dispatch and clerical duties at Police Headquarters.

Additional Work Responsibilities

- May be assigned to perform predominantly parking meter maintenance and collection duties.
- May conduct or assist in conducting investigations and surveillances.
- Appears before special interest groups to speak on various aspects of police work.
- Performs related duties as required.

Required Knowledge, Abilities, and Skills

Ability to be trained in modern methods of first aid; ability to be trained in all aspects of entry-level police work; ability to observe situations analytically and objectively and to record the situation and information gathered in a complete and clear manner; ability to handle conflicting priorities; ability to react quickly and calmly in emergencies; ability to mediate disputes; ability to establish and maintain effective working relationships with associates and the public; ability to deal firmly but courteously with the public and communicate effectively with diverse community members and groups; ability to learn modern methods of crime detection and prevention; ability to understand and execute written and oral instructions; ability to prepare clear and comprehensive reports; ability to learn the effective use and care of firearms and other self-protective devices; ability to drive a police vehicle in hazardous conditions; and sufficient physical strength and agility to defend oneself or to subdue violent persons.

Method of Selection

Non-Certified Applicants: Candidates who successfully pass all phases of the examination for this position will have their names placed on an Eligible List.

The examination process includes:

Method of Selection

Certification of Physical Ability
Written Examination
Oral Board Interview

Weight

Pass/Fail
Pass/Fail
Pass/Fail

Written Examination: The written examination will be scheduled on an individual basis. Information confirming the exam date and including the exam time and location will be mailed to you prior to the date of the examination. The minimum passing score on the written examination will be based on an acceptable passing rate as determined by the Director of Employee Services. You must pass the written examination to be eligible to be invited to the oral board interview. Candidates who fail to achieve the minimum passing score on the written examination will be disqualified from any further consideration for the position. (The Town of West Hartford reserves the right to administer a second written examination at its discretion.)

Oral Board Interview: The last phase of the examination for Police Officer will be an interview before a panel of police and/or personnel representatives. This phase of the examination is designed to aid in the determination of a candidate's maturity, communication skills and motivation for the position. The Town reserves the right to limit the number of candidates who are invited to the oral interview. Candidates who have passed the written examination but who have failed this portion of the examination will be disqualified at this time from any further consideration for the position of Police Officer.

Certification of Physical Ability: All candidates are required to produce evidence of physical ability as certified through Complete Health and Injury Prevention, Inc. (CHIP, Inc.). **Evidence of certification is the candidate's responsibility and is obtained separately from the Town of West Hartford recruitment process.** To participate in the physical ability testing, candidates must register with CHIP, Inc. by completing a registration form and mailing it directly to CHIP, Inc. The Physical Ability Test is designed to determine if an applicant has sufficient physical strength and agility to defend him or herself and/or to subdue a violent person. (See CHIP, Inc. materials for details)

Background Investigation: A thorough background and character investigation will be conducted for the specific purpose of obtaining pertinent data for the West Hartford Police Department to consider in determining suitability for employment as a Police Officer. Eligible candidates will be requested to authorize a release of personal information, however personal or confidential it may appear to be, including but not limited to, educational, financial/credit agencies and institutions, medical history, employment history, legal complaints, arrests, or convictions and motor vehicle history.

The Police Chief reserves the right to reject any eligible candidate whom, on the basis of background and character investigation or medical examination, does not appear to be the most suitable qualified candidate for the position in accordance with provisions of the Town of West Hartford Personnel Rules.

If you fail to appear for any part of the examination process, or if you do not pass any part of the examination, your name will be removed from any further consideration.

An individual appointed to the position must satisfactorily complete an 18-month probationary period.

Application Process

Applications are available in the Employee Services Department, Room 221 of the West Hartford Town Hall; or may be accessed on the Town's website at www.westhartfordct.gov.

**FAILURE TO FULLY COMPLETE AND SUBMIT ALL APPLICATION MATERIALS WILL
AUTOMATICALLY DISQUALIFY YOUR APPLICATION AND
APPLICATION MATERIALS WILL BE RETURNED BACK TO YOU.**

The Town of West Hartford shall not discriminate on the basis of race, color, creed, age, sex, national origin, physical disability or sexual orientation. The Department of Employee Services provides reasonable accommodation to persons with disabilities in accordance with the Americans with Disabilities Act (ADA). If you need an accommodation in regard to the application or testing process, please contact the Employee Services Department at (860) 561-7480.

Town of West Hartford
APPLICATION FOR EMPLOYMENT

PLEASE READ BEFORE FILLING OUT THIS APPLICATION

In compliance with the Freedom of Information Act, this application and information contained herein may be considered a matter of public record.

The Town of West Hartford does not discriminate in hiring on the basis of race, color, religious creed, national origin, sex, age, physical disability or veteran status. No question on this application is intended to secure information to be used for such discrimination.

Please return this application to the Town of West Hartford, Department of Employee Services, 50 South Main Street, West Hartford, CT 06107. If you have any questions, call (860) 561-7480.

An Equal Opportunity Employer M/F

Answer every question on this application. Type or complete in ink.

Date: _____

POSITION APPLYING FOR: POLICE OFFICER

DATE OF BIRTH (*must provide*) _____

PERSONAL INFORMATION

Name: _____
FIRST MIDDLE INITIAL LAST

Social Security # _____

Address: _____
NUMBER STREET

Home Telephone Number: _____

CITY STATE ZIP

Business Telephone Number: _____

Cell Phone Number: _____

Email: _____

Any other Name Known as (AKA, Maiden) _____

Driver's License # _____ State: _____

ANY FALSE OR UNDISCLOSED INFORMATION IN ANY PART OF THE APPLICATION PROCESS WILL RESULT IN AUTOMATIC TERMINATION OF YOUR APPLICATION. THIS INCLUDES, BUT IS NOT LIMITED TO THE FOLLOWING: DRUG USE, ARREST HISTORY, MOTOR VEHICLE HISTORY, WORK HISTORY, PLACE OF RESIDENCE, AND MILITARY SERVICE.

MINIMUM QUALIFICATIONS: (Check all that apply)

- Associates Degree **OR** equivalency (60 credit hours) at an accredited college/university ____ YES ____ NO
- **OR** four years active military experience ____ YES ____ NO
- **OR** certified Connecticut police officer ____ YES ____ NO

If "YES" to any of the above, attach appropriate documentation (transcript, DD-214, or Post Certification.)

Application Disqualifiers:

You are subject to these disqualifiers during the background investigation, including the polygraph:

	YES	NO
Are you under 21 years old?		
Has your driver's license been suspended for ANY reason during the last 5 years?		
Have you been dismissed by any law enforcement agency?		
Have you retired or resigned from any law enforcement agency while under investigation?		
Have you had 4 or more motor vehicle convictions in the last 3 years?		
Have you been convicted of a Felony or Class A or B misdemeanor?		
Have you been convicted of a domestic violence related offense?		
Have you used ANY tobacco product (Cigarette, Cigar, Hookah, etc.) within the last six (6) months?		
Do you have body art that is in violation of the attached Body Art Acknowledgement?		
Have you used cocaine, LSD, misused a narcotic prescription, or committed any undetected felony drug use?		
Have you had a less than honorable discharge from any branch of the military?		

If you have answered "YES" to any of the above, your application will not be accepted and will be returned to you.

Are you a citizen of the United States of America? Yes ____ No ____

If you answered no, your application will be returned. POST Certification requires US citizenship.

Previous Applications:

Have you previously applied for the position of **Police Officer** with the Town of West Hartford?

Yes ____ No ____ If yes, date? ____

EDUCATION

(List All, attach additional sheets if necessary)

INSTITUTION NAME	ADDRESS CITY STATE	MAJOR COURSE OR SUBJECT	CIRCLE LAST YEAR COMPLETED	LIST DEGREE RECEIVED
G.E.D. EQUIVALENCY				
HIGH SCHOOL OR PREPARATORY			1 2 3 4	
COLLEGE			1 2 3 4	
			1 2 3 4	
GRADUATE WORK			1 2 3 4	

EMPLOYMENT RECORD:

Provide your employment history beginning with your most recent employer and work back listing ALL previous employers. Include any applicable military and voluntary positions. Use additional sheets of plain paper if you need more space.

May we contact your present employer: Yes _____ No _____

1) Name & Address of Employer: _____

Starting Date: Month _____ Year _____ Ending Date: Month _____ Year _____

Salary: Beginning: _____ Present: _____ Hours per Week: _____

Name and Title of your Supervisor: _____

Reason for leaving: _____

Your present or last job title: _____

Your duties: _____

2) Name & Address of Employer: _____

Starting Date: Month _____ Year _____ Ending Date: Month _____ Year _____

Salary: Beginning: _____ Ending: _____ Hours per Week: _____

Name and Title of your Supervisor: _____

Reason for leaving: _____

Your last job title: _____

Your duties: _____

3) Name & Address of Employer: _____

Starting Date: Month _____ Year _____ Ending Date: Month _____ Year _____

Salary: Beginning: _____ Ending: _____ Hours per Week: _____

Name and Title of your Supervisor: _____

Reason for leaving: _____

Your last job title: _____

Your duties: _____

4) Name & Address of Employer: _____

Starting Date: Month _____ Year _____ Ending Date: Month _____ Year _____

Salary: Beginning: _____ Ending: _____ Hours per Week: _____

Name and Title of your Supervisor: _____

Reason for leaving: _____

Your last job title: _____

Your duties: _____

CERTIFICATION: I certify the above information is correct and truthful. I realize, too, that falsification of any information on this application may be grounds for rejection of this application, or termination of employment, depending upon when the falsification is discovered. I also give consent for you to check with previous employers and personal references and release the Town, previous employers and personal references from any liability arising from disclosure of information concerning my past employment or personal history. I further understand the acceptance of this form by the Town does not constitute an employment agreement. Failure to completely fill out this application may result in my disqualification from any further consideration for employment.

I hereby acknowledge that I have read the above statements and understand them.

SIGNATURE: _____ DATE: _____

Drug Testing Supplement to Employment Application

It is the policy of the West Hartford Police Department to maintain a safe, healthy and productive work environment for its employees; to provide quality service to the people of the Town of West Hartford; to maintain the integrity and security of its facilities and property; and to perform all these functions in a manner consistent with the interests and concerns of the Town.

Pursuant to these goals, the Town of West Hartford requires that candidates for the position of Police Officer pass a drug screening test as part of the pre-employment medical examination. The drug screening test covers illegal substances and certain legal substances subject to abuse.

The drug test will screen for the following compounds:

- ♦ Marijuana
- ♦ Cocaine
- ♦ Opiates
- ♦ Phencyclidine
- ♦ Amphetamines

The testing process requires that candidates sign a separate consent and release statement provided by the Town of West Hartford prior to drug testing. Refusal to submit to the testing process will result in the candidate's disqualification for further employment consideration.

My signature below indicates that I have read and understand the above statement regarding drug testing.

Print Name

Signature

Date

Non-Smoking Statement

Dear Police Officer Candidate:

In accordance with a Memorandum of Understanding, the Town of West Hartford requires that any Police Officer hired on or after January 1, 1989 shall refrain from smoking as a condition of employment.

I attest that I have refrained from smoking (**Cigar, Cigarette, Hookah and the like**) for at least the past six (6) months, as indicated by my signature below.

Name (please print): _____

Signature: _____

Date: _____

Body Art Acknowledgement

Dear Police Officer Candidate:

As a condition of obtaining and continued employment with the Town of West Hartford Police Department, all Police Officers hired on or after December 1, 2012 shall adhere to the following standards regarding Body Art:

- The applicant agrees that as a condition of employment they will not **add** any body art (or portion thereof) to an area of skin that is exposed while wearing a short sleeve uniform shirt or uniform shorts.
- Body art which could reasonably be interpreted as advocating violence or other criminal acts or as a symbol of intolerance or hatred is prohibited regardless of whether it is visible or not. Examples include symbols associated with Nazi, White Supremacy or Confederate groups, gang symbols, etc. Determination of acceptability is the sole discretion of the Chief of Police.
- Body art above the neckline, to include brandings, piercings and tattoos, are prohibited. (Exception: female applicants are allowed to wear two stud type earrings, no other ear adornments, while working.)
- Prior to the Oral Interview (interview with the Assistant Chiefs). An applicant will be required to provide a list of all tattoos and/or brandings and their location. Additionally, photos of all tattoos and brandings that would be visible while wearing a short sleeve uniform shirt or pair of uniform shorts shall be provided. ***Applicants will be given further instructions on this after passing the written exam.***

I have read and acknowledge the above by my signature below.

Name (Print)

Signature

Date

Town of West Hartford

AFFIRMATIVE ACTION QUESTIONNAIRE

INSTRUCTIONS: The completion of this form is voluntary. However, the information is needed for compliance with governmental selection requirements and for EEO reports. It will be detached when your application is filed and the information on it will not be considered in the employment process.

1. Position Applied For: **POLICE OFFICER**

2. AGE (Please check one)

_____ 21 to 25 _____ 26 to 40
_____ 41 to 65 _____ 66 to older

3. Sex:

_____ Male
_____ Female

4. Ethnic Racial Status (Please check one only)

_____ White _____ Hispanic _____ American Indian/Alaskan Native
_____ Black/African American _____ Asian _____ Native Hawaiian/Pacific Islander
_____ Two (2) or more races
_____ Disabled Veteran _____ Vietnam Era Veteran _____ Other Veteran

5. HOW DID YOU HEAR ABOUT THIS JOB?

a) _____ Internet i) _____ Minority Agency _____
b.) _____ Hartford Courant j) _____ Female Agency _____
c) _____ New Britain Herald k) _____ Radio/Television
d) _____ West Hartford News l) _____ A current employee _____
e) _____ CT Employment Service m) _____ Professional Journal _____
f) _____ Professional Organization n) _____ Private Employment Agency
g) _____ New England Minority News o) _____ Other _____
h) _____ West Hartford Web Site

I certify that the above information is true and correct.

NAME _____ DATE _____
ADDRESS _____ CITY _____ STATE _____
SIGNATURE _____

AFFIRMATIVE ACTION

The Town of West Hartford, in compliance with Title 1 of the American with Disabilities Act of 1990 (ADA), and Section 503 of the Rehabilitation Act of 1973, takes affirmative action to employ and advance in employment qualified individuals with disabilities. If you have such a disability and would like to be considered under the Affirmative Action Program, please tell us.

Submission of this information is voluntary and refusal to provide it will not subject you to discharge or disciplinary treatment. Information obtained shall be kept confidential, except that (1) supervisors and managers may be informed regarding restrictions on the work or duties of qualified individuals with disabilities and regarding necessary accommodations; (2) first aid and safety personnel may be informed, when and to the extent appropriate, if the condition might require emergency treatment; and (3) government officials investigating compliance with the Act shall be informed.

Are you able to perform the essential functions of the job with or without accommodation? ____ Yes ____ No

If you are disabled, are there any accommodations needed to participate in the application process or accommodations which we could make which would enable you to perform the job properly and safely, including special equipment, changes in the physical layout of the job, elimination of certain duties relating to the job, or other accommodations? ____ Yes ____ No If "YES", please explain:



About the C.H.I.P. Program

C.H.I.P. administers the Police Physical Ability Assessment for more than 60 Connecticut Police Agencies. Upon successful completion of the assessment candidates receive a C.H.I.P. card. Cards are valid for a 6-month period and accepted by participating departments. Each participating department is responsible for establishing what CHIP test dates or CHIP card expiration dates are acceptable for their hiring process. It is an applicant's responsibility to identify these dates and determine when or if they need to take the CHIP test.

Signing up for the C.H.I.P. Assessment

STEP 1- PRINT AND COMPLETE THESE FORMS. The Medical Approval Form must be signed, stamped, and dated by your Doctor. It must be dated within 6 months of the test date. Next complete the registration form. Make sure that you neatly print all information.

STEP 2- MAIL YOUR FORMS. Mail the Medical Approval Form, Registration Form and the non refundable \$65.00 Money Order or Cashiers Check, (no personal checks).

Make payable to: C.H.I.P. and mail it to P.O. Box 774, Meriden, CT. 06450.

STEP 3- CALL C.H.I.P. Three days after mailing your forms call C.H.I.P. to receive your assessment time and details. The phone number is **203-235-5865**.

CHIP Schedule

Each department that participates in the CHIP program determines a **cutoff date** for their hiring process. This is the date when an applicant must have a current CHIP card. It is the applicant's responsibility to sign up for a CHIP test that will allow you to meet that date. *Assessment dates and locations are available on www.chip-inc.com and clicking on Physical Ability Assessment Schedule.* CHIP tests are offered on a monthly basis and registration forms must be postmarked one week prior to the assessment date in order to meet the registration deadline.



Registration Form

Complete this form and mail it with, a completed Medical Approval Form, and a non-refundable \$65.00 assessment fee (money order or cashiers check) to:
C.H.I.P. P.O. Box 774, Meriden, CT. 06450

Neatly print or type below.

Name _____
First Last MI

Age _____ D.O.B. _____

Male / Female

Address _____

_____ City State Zip

Preferred Phone () _____ Other Phone () _____

Emergency Contact: Name _____ Number () _____

City/Town to which you are applying: _____

Assessment Date: _____

(By failing to appear at the specified assessment date above you will forfeit your assessment fee and registration forms will not be carried over to future assessments.)



P.O. Box 774
Meriden, CT. 06450
(203) 235-5865

Physical Ability Assessment
Medical Approval Form

To be filled in by physician:

This is to certify that I have *reviewed* the attached four elements of the *Connecticut Police Officer Standards and Training Council's* Physical Ability Assessment. After reviewing said document, it is my professional opinion that the candidate named below:

Candidate's Name: _____

Department(s) Applying to : _____

CAN SAFELY PERFORM THE PHYSICAL ABILITY ASSESSMENT.

Physician's Signature: _____
(M.D. or D.O.)

Date

Physician's Name and
Address (Type or Imprint
With Office Stamp)



Medical Approval Forms backdated more then six months cannot be accepted

Connecticut Police Officer Standards and Training Councils Physical Ability Assessment Standards

The physical ability assessment includes the four stations described below. These standards are required by the Connecticut Police Officers Standards and Training Council

Sit-ups	Muscular Endurance	The score is the number of correct full bent leg sit-ups performed in one minute. Your feet are held and your fingers tips are tucked behind your ears.
300 Meter Run	Anaerobic Power	Run at maximal effort for 300 meters.
Push Up	Muscular Endurance	The score is the number of correct full body Push-ups performed in one minute. Starting in the up position, hands placed slightly wider than shoulder width apart, fingers pointing forward with a straight back. Bend your elbows lowering your body towards the floor and touch your chest to the measuring block (approximately four inches from floor) and return to the up position.
1.5 Mile Run	Cardiovascular Capacity	1.5 mile run. You are required to run, walk or jog, one and a half miles within your allotted time limit. The score is in minutes and seconds.

Standards for Passing

AGE/GENDER	SIT-UP	PUSH UP	300 METER RUN	1.5 MILE RUN
Male	Pass	Pass	Pass	Pass
20-29	38	29	59 seconds	12:38
30-39	35	24	58.9 seconds	12:58
40-49	29	18	72 seconds	13:50
50-59	24	13	83.2 seconds	15:06
60-69	19	10	93 seconds	16:46

Female	Pass	Pass	Pass	Pass
20-29	32	15	71 seconds	14:50
30-39	25	11	79 seconds	15:43
40-49	20	9	94 seconds	16:31
50-59	14	7	109 seconds	18:18